

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No 1215-0188
Expires 11 30-2006

This report is mandatory under P L 86-257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U <u>3391</u>	2 Fiscal Year Covered From <u>1</u> / <u>1</u> / <u>2004</u> Through <u>12</u> / <u>31</u> / <u>2004</u>
3 Name and address of person filing Name <u>Thomas E Hudson</u> P O Box Bldg Room No if any Street <u>2919 Pine Mt Rd</u> City <u>Remlap</u> State <u>Alabama</u> ZIP Code + 4 <u>35133</u>	4 Name file number and address of labor organization Name <u>BLK T Legislative Board</u> Labor Organization File Number <u>016304</u> P O Box Building and Room Number if any Street <u>2919 Pine Mt Rd</u> City <u>Remlap, AL</u> State <u>Alabama</u> ZIP Code + 4 <u>35133</u>
5 Position in labor organization <u>LOCAL CHAIRMAN DIVISION 156, State CHAIRMAN, Alabama</u>	

Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)

A Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent	
6 Name and address of Employer (including trade name if any) Name <u>J. ANDERSON HARP</u> Trade Name if any <u>Taylor, Harp, Callier & Morgan</u> P O Box Bldg Room No if any <u>P.O. Box 2645</u> Street City <u>Columbus</u> State <u>GA</u> ZIP Code + 4 <u>31902</u>	7 a Nature of Interest, Transaction or Income <u>GOLF OUTING 6-13-2004</u> <u>GOLF OUTING 6-14-2004</u> <u>DINNER 6-14-2004</u> 7 b Amount <u>135.00</u>

Signature

15 Signature and verification The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true correct and complete (See the section on penalties in the instructions)		
Signed <u>TE Hudson</u>	On <u>7-11-05</u> Date	<u>205-960-7844</u> Telephone Number

Name of Person Filing

File Number U

3391

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

9 Business deals with

☐ a Labor Organization☐ b Trust☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

11 a Nature of such dealing

11 b Approximate dollar value of such dealing

12 a Nature of interest held or income received

12 b Amount

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

14 a Nature of payment

13 b Is the Business an Employer ☐ or Consultant ☐ ?

14 b Amount of payment

Part B

Name of Reporting Employer	J Anderson Harp	File Number	E
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Check item Number (from Page 2) to which this Part B applies	ITEM 8.a <input checked="" type="checkbox"/>	ITEM 8.b <input type="checkbox"/>	ITEM 8.c <input checked="" type="checkbox"/>	ITEM 8.d <input type="checkbox"/>	ITEM 8.e <input type="checkbox"/>	ITEM 8.f <input type="checkbox"/>
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9.a. <input type="checkbox"/> Agreement <input checked="" type="checkbox"/> Payment <input type="checkbox"/> Both		9.c. Position in labor organization or with employer (if an independent labor consultant, so state). [REDACTED]
9.b. Name and address of person with whom or through whom a separate agreement was made or to whom payments were made. Name <u>Remlap, Hudson</u> Local Chairman, Division 156 P O Box, Building and Room Number, if any [REDACTED] Street <u>2019 Pine Mountain Road</u> City <u>Remlap</u> State <u>Alabama</u> ZIP Code + 4 <u>35133</u>		9.d. Name and address of firm or labor organization with whom employed or affiliated. Organization <u>Blue Ridge Restaurant</u> P O Box, Building and Room Number, if any [REDACTED] Street <u>Blue Ridge Restaurant</u> City <u>Blue Ridge</u> State <u>Alabama</u> ZIP Code + 4 <u>35133</u>
10.a. Date of the promise, agreement, or arrangement pursuant to which payments or expenditures were agreed to or made <u>June 14, 2004</u>		10.b. The promise, agreement, or arrangement was: <input type="checkbox"/> Oral <input type="checkbox"/> Written <input type="checkbox"/> Both ("Written agreements entered into during the fiscal year must be attached.")
11.a. Date of each payment or expenditure (mm/dd/yyyy). <u>06/14/2004</u> [REDACTED] [REDACTED] [REDACTED] [REDACTED]	11.b. Amount of each payment or expenditure <u>473.00</u> [REDACTED] [REDACTED] [REDACTED] [REDACTED]	11.c. Kind of each payment or expenditure (Specify whether payment or loan and whether in cash or property) <u>Check to Blue Ridge Restaurant</u> [REDACTED] [REDACTED] [REDACTED] [REDACTED]
12. Explain fully the circumstances of all payments, including the terms of any oral agreement or understanding pursuant to which they were made. <u>Dinner Sponsor during SMA Convention Greenville, South Carolina. Value of gift to this individual for his share of the dinner is believed to be at least \$30.00 (of the \$473.00 stated above), but would not have exceeded \$45.00 (with beverages, tips, de minimis expenses).</u>		

Part B

Name of Reporting Employer	J Anderson Harp	File Number E-
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Check Item Number (from Page 2) to which this Part B applies	ITEM 8.a <input checked="" type="checkbox"/>	ITEM 8.b <input type="checkbox"/>	ITEM 8.c <input type="checkbox"/>	ITEM 8.d <input type="checkbox"/>	ITEM 8.e <input type="checkbox"/>	ITEM 8.f <input type="checkbox"/>
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9.a. <input type="checkbox"/> Agreement <input checked="" type="checkbox"/> Payment <input type="checkbox"/> Both		9.c. Position in labor organization or with employer (if an independent labor consultant, so state). [REDACTED]
9.b. Name and address of person with whom or through whom a separate agreement was made or to whom payments were made. Name <u>T. Hudson</u> Chairman, Local 156 Legislative Representative P O Box, Building and Room Number if any [REDACTED] Street <u>2019 Pine Mountain Road</u> City <u>Remlap</u> State <u>Alabama</u> ZIP Code + 4 <u>35133</u>		9.d. Name and address of firm or labor organization with whom employed or affiliated. Organization <u>HEAT-5/12/a-BLP</u> P O Box, Building and Room Number if any [REDACTED] Street <u>[REDACTED]</u> City <u>[REDACTED]</u> State <u>[REDACTED]</u> ZIP Code + 4 <u>[REDACTED]</u>
10.a. Date of the promise, agreement, or arrangement pursuant to which payments or expenditures were agreed to or made. <u>June 14, 2004</u>		10.b. The promise, agreement, or arrangement was: <input type="checkbox"/> Oral <input type="checkbox"/> Written <input type="checkbox"/> Both ("Written agreements entered into during the fiscal year must be attached.")
11.a. Date of each payment or expenditure (mm/dd/yyyy). <u>06-14-2004</u> [REDACTED] [REDACTED] [REDACTED]	11.b. Amount of each payment or expenditure <u>78.00</u> [REDACTED] [REDACTED] [REDACTED]	11.c. Kind of each payment or expenditure (Specify whether payment or loan, and whether in cash or property) <u>Check</u> [REDACTED] [REDACTED] [REDACTED]
12. Explain fully the circumstances of all payments, including the terms of any oral agreement or understanding pursuant to which they were made. <div style="border: 1px solid black; padding: 10px;"> <p>Host for Golf Outing with J. Wilson and T. Hudson at SMA Convention Greenville, South Carolina. Value of gift believed to be at least \$39.00, but not to exceed \$50.00, for his share of greens fees and refreshments.</p> </div>		

Part B

Name of Reporting Employer J Anderson Harp	File Number E-
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9.a. <input type="checkbox"/> Agreement <input checked="" type="checkbox"/> Payment <input type="checkbox"/> Both		9.c. Position in labor organization or with employer (if an independent labor consultant, so state). [REDACTED]
9.b. Name and address of person with whom or through whom a separate agreement was made or to whom payments were made. Name: Robert J. Hudson Local Chairman, Division 156 State Legislative Representative State of Alabama P O Box, Building and Room Number, if any [REDACTED] Street: 2919 Pine Mountain Road City: Reelap State: Alabama ZIP Code + 4: 35133		9.d. Name and address of firm or labor organization with whom employed or affiliated. Organization: SEPA-BLK/AC-BLK/INTL-E P O Box, Building and Room Number, if any [REDACTED] Street: [REDACTED] City: [REDACTED] State: [REDACTED] ZIP Code + 4: [REDACTED]
10.a. Date of the promise, agreement, or arrangement pursuant to which payments or expenditures were agreed to or made. June 13, 2004		10.b. The promise, agreement, or arrangement was: <input type="checkbox"/> Oral <input type="checkbox"/> Written <input checked="" type="checkbox"/> Both (*Written agreements entered into during the fiscal year must be attached.)
11.a. Date of each payment or expenditure (mm/dd/yyyy). 06/13/04 [REDACTED] [REDACTED] [REDACTED] [REDACTED]	11.b. Amount of each payment or expenditure 150.00 [REDACTED] [REDACTED] [REDACTED] [REDACTED]	11.c. Kind of each payment or expenditure (Specify whether payment or loan and whether in cash or property) check [REDACTED] [REDACTED] [REDACTED] [REDACTED]
12. Explain fully the circumstances of all payments, including the terms of any oral agreement or understanding pursuant to which they were made. Sponsor of Golf Outing during SBA Convention Greenville, South Carolina Value of Gift believed to be worth at least \$25.00 for his share of the total expense, but not in excess of \$40.00 for his share of the greens fees and refreshments		